

WATH-UPON-DEARNE
URBAN DISTRICT COUNCIL

THE HEALTH OF
WATH-upon-DEARNE
1966

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WATH-UPON-DEARNE URBAN DISTRICT COUNCIL

Members as at 31st December, 1966

Chairman of the Council:

Councillor E. Cooper, J.P.

Vice-Chairman of the Council:

Councillor W. Cutts (C.A.)

Chairman of the Public Health Committee:

Councillor Mrs. E. Hardwick

Councillors:

E. Brown	C. A. Kelly
J. W. Espley	M. Little
P. Hardy (L.C.P.)	C. Naylor
Mrs. C. M. Hill	H. Norton
G. H. Hill	D. Turner
R. J. Hughes	Mrs. E. Walton

Medical Officer of Health:

D. J. Cusiter, M.B., Ch.B., D.P.H., D.T.M. & H.

Chief Public Health Inspector:

W. W. Wilkinson, F.A.P.H.I., Cert.S.I.B.

P R E F A C E

Public Health Department,
Town Hall,
Wath-upon-Dearne.

To the Chairman and Members of
Wath-upon-Dearne Urban District Council

Mr. Chairman, Ladies and Gentlemen :

I include in this annual report of the health of your district details of the County Council health and school health services.

The population showed a natural increase of 110 but the Registrar General's estimate of the resident population for mid-1966 was the same as for mid-1965.

There were no maternal deaths in the district. 4 infant deaths were recorded from a total of 282 live births, 3 of which were due to respiratory infections. 3 of the infants died at home and one in hospital. The infant mortality rate (deaths under one year of age per thousand live births) was 14.2 which compares very favourably with a West Riding rate of 20.1 and the rate for England and Wales of 19.0. The rate for health division no. 26 as a whole was 22.1.

The corrected birth rate of 17.1 was slightly lower than that recorded for 1965. The West Riding rate is 18.2.

The corrected death rate was 13.8 (West Riding 12.9) and shows little difference to the rate for the previous year.

The total deaths were 172 of which 63 were due to diseases of the heart and blood vessels, 30 to cancer in various sites, 35 to respiratory diseases and 13 to vascular lesions of the nervous system. These correspond to rates of 4.11 (West Riding 4.48); 1.96 (West Riding 2.00); 2.22 (West Riding 1.72); and 0.05 (West Riding 1.87).

It will be noted that the death rate for respiratory diseases is far in excess of that for the West Riding as a whole and compares unfavourably with the rate of 1.30 which was recorded in Wath-upon-Deane last year.

There were no deaths from tuberculosis and one from infectious disease.

10 illegitimate births were registered compared with 11 for the previous year, with no deaths.

During the year the Council made a further smoke control order relating to an area containing 267 privately owned dwellings and 526 Council owned dwellings.

The care of the elderly is rapidly becoming one of the major problems of the health department. The district councils are providing more and more ground floor accommodation with warden supervision, but surveys carried out by this department for each district in connection with the allocation of tenancies in new schemes show that the need for such accommodation is probably double that already provided.

Modern residential homes, each with accommodation for 35 old people, have been provided in recent years by the County Welfare Committee in Rawmarsh, Wath-upon-Deane, Thurnscoe and Conisbrough. A similar building in Swinton will be opened in 1967. Nevertheless, there is still a long waiting list for admissions.

344 aged persons in the division benefit from meals on wheels service and 784 meals are provided weekly at a charge of 1s. 0d. per head to the recipient. 2,744 old people received chiropody treatment during 1966 when 12,665 treatments were carried out either in clinics or at the homes of the patients. The home help service is provided in the homes of 1,265 pensioners and home helps were employed for a total of 172,337 hours at these homes in the year. In emergencies, for terminal cases of illness, night care is also available.

The biggest problem, however, is the shortage of geriatric hospital beds. Day after day, relatives write or visit this office enlisting the help of the Medical Officer of Health regarding admission of their aged parents to hospital. Many of these relatives have struggled for months to provide the necessary care and attention themselves, others are reluctant to do so or for pressing family reasons are unable to do so. It appears to the public that, because hospital admissions for aged sick persons take so long in this area, the general practitioner in charge of the case is not doing all he can for the patient and they assume that the Medical Officer of Health has overall authority over the situation, which he has not.

A Planning Group for the care of the elderly in hospitals and residential homes, of which I am a member, was formed by the Rotherham and Mexborough Hospital Management Committee in 1966 to discuss these problems. It is estimated that there is a 48% shortage of geriatric beds in the area of the Hospital Management Committee and until this deficiency is rectified the work of the general practitioner will continue to increase and more resources will be needed by the local authority to fill the breach.

The shortage of general practitioners in the area poses yet a further problem. The County Council in an effort to provide better facilities for the family doctor, offers accommodation in child welfare centres for surgery purposes at a modest rental, and in the division family doctors are using Mexborough clinic (three practices), Conisbrough clinic (one practice), Monkwood clinic (one practice) and Kilnhurst clinic (one practice). Thurnscoe clinic is at present being extended to provide accommodation for a group practice of four doctors, and a new clinic being planned for Swinton will be able to accommodate four family doctors. General Practitioners also conduct their own antenatal clinics with assistance from the District Midwives at Conisbrough and Mexborough clinics. All Health Visitors in the division are attached to general practitioners, as are the Home Nurses.

The morbidity statistics for the area as supplied by the Ministry of Social Security reveal a high incidence of sickness in the weeks immediately following bank holidays, works holidays and during the September race week in Doncaster. Would it be naive to conclude that holidays have a harmful effect on the health of some? This problem is national and not confined to this area. The Executive Council are aware of the problem of the shortage of family doctors in this area.

I wish to record my thanks to Mr. W. W. Wilkinson the Public Health Inspector for his work and co-operation during the year and also to the members of the Public Health Committee for their continued support. My thanks are also due to the staff of the Divisional Health Office for their help in the preparation of this report.

I remain,

Your obedient servant,

D. J. CUSITER,

Medical Officer of Health

Divisional Public Health Office,

Dunford House,

Wath-upon-Dearne, Rotherham.

Tel. No. Wath-upon-Dearne 2251/2

SECTION "A"

NATURAL AND SOCIAL CONDITIONS OF THE AREA

(a) General Statistics

Area (in acres)	...	...	...	...	...	2,665
Registrar-General's estimate of Resident Population Mid-1966	...	...	...	...	...	15,330
Number of inhabited houses at 31st December, 1966						5,261
Population density (persons per house)	...			...	...	2.9
House density (houses per acre)	...		...	...	...	1.9
Rateable value	...	...	...	...	...	£620,688
Net product of 1d. rate	...	...	...	...	...	£2,257

(b) Physical and Social Conditions

The Registrar General's estimate of resident population for mid-1966 showed no change in the population. The natural increase i.e. excess of births over deaths for the year was 110.

The number of dwelling houses decreased by 20.

35 new houses were completed, 27 by the local authority and 8 by private enterprise, but 55 properties were demolished during the year.

The main employment in the area is provided by coal mining (61% men), electric domestic equipment, coal by-products, glass containers, stoves and grates and soft drink manufacture. Over 400 women travel daily by organised transport to employment in the West Riding textile industry, food canning at Sheffield, engineering at York and confectionery at Rotherham.

VITAL STATISTICS

Live Births—				Males	Females	Total
Total	...	...	...	129	153	282
Legitimate	...	...	...	126	146	272
Illegitimate	...	...	...	3	7	10
Live Birth Rate (uncorrected)						
per 1,000 population	...	...	...	...	...	18.4
Live Birth Rate (corrected)						
per 1,000 population	...	...	...	...	...	17.0
Illegitimate live births percentage of total						
live births	...	...	...	...	...	3.5

Still births—

				Males	Females	Total
Total	...	...	...	7	1	8
Rate per 1,000 live and still births	...	...	...			27.6
Total Live and Still births	...	...	...	136	154	290

Deaths of Infants under 1 year of age—

				Males	Females	Total
Total	...	...	...	2	2	4
Legitimate	...	...	...	2	2	4
Illegitimate	...	...	...	—	—	—
Infant Mortality Rate per 1,000 live births	...	...	...			14.2
Legitimate Infants per 1,000 legitimate live births	...	...	...			14.7
Illegitimate Infants per 1,000 illegitimate live births	...	...	...			—
Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births)	...	...	...			3.5
Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	...	...	...			3.5
Perinatal mortality rate (still births and deaths under 1 week combined per 1,000 total live and still births	...	...	...	...	...	31.0

Maternal mortality, including abortion—

Number of deaths	...	...	...	...	...	Nil
Rate per 1,000 total live and still births	...	...	...	...	...	—

Total Deaths	...	...	...	...	...	172
Death Rate (uncorrected)	...	...	...	...	...	11.2
Death Rate (corrected)	...	...	...	...	...	13.8
Natural increase of population	...	...	...	...	...	110

Causes of Death at different periods of life during 1966 in the Urban District of Wath-upon-Dearne

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS									
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over	
3. Syphilitic Disease.	M	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Malignant Neoplasm, Stomach.	F	1	—	—	—	—	—	—	—	—	—	—	1	—
11. Malignant Neoplasm, Lung, Bronchus.	M	1	—	—	—	—	—	—	—	—	—	1	—	—
11. Malignant Neoplasm, Lung, Bronchus.	F	1	—	—	—	—	—	—	—	—	—	—	1	—
12. Malignant Neoplasm, Breast	M	7	—	—	—	—	—	—	—	2	—	2	3	—
12. Malignant Neoplasm, Breast	F	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Malignant Neoplasm, Uterus.	M	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Malignant Neoplasm, Uterus.	F	1	—	—	—	—	—	—	—	—	—	—	1	—
14. Other Malignant and Lymphatic Neoplasms.	F	3	—	—	—	—	—	—	—	1	—	1	1	—
14. Other Malignant and Lymphatic Neoplasms.	M	7	—	—	—	—	—	—	—	1	—	—	3	2
16. Diabetes	F	10	—	—	—	—	—	—	—	—	—	—	5	1
16. Diabetes	M	1	—	—	—	—	—	—	—	—	—	—	—	—
16. Diabetes	F	2	—	—	—	—	—	—	—	—	—	—	—	—
17. Vascular Lesions of Nervous System.	M	6	—	—	—	—	—	—	—	—	—	1	3	—
17. Vascular Lesions of Nervous System.	F	7	—	—	—	—	—	—	—	—	1	1	2	—
18. Coronary Disease, Angina.	M	23	—	—	—	—	—	—	—	—	1	1	9	—
18. Coronary Disease, Angina.	F	14	—	—	—	—	—	—	—	1	2	8	9	—
19. Hypertension with heart disease.	M	1	—	—	—	—	—	—	—	—	—	—	—	—
19. Hypertension with heart disease.	F	—	—	—	—	—	—	—	—	—	—	—	—	—
20. Other heart disease.	M	7	—	—	—	—	—	—	—	—	—	—	—	6
20. Other heart disease.	F	10	—	—	—	—	—	—	—	—	1	—	4	4
21. Other Circulatory disease.	M	3	—	—	—	—	—	—	—	—	—	—	2	1
21. Other Circulatory disease.	F	5	—	—	—	—	—	—	—	—	—	—	—	5
22. Influenza.	M	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Influenza.	F	1	—	—	—	—	—	—	—	—	—	—	—	—
23. Pneumonia.	M	7	—	—	—	—	—	—	—	—	—	1	1	5
23. Pneumonia.	F	3	—	—	—	—	—	—	—	—	—	—	—	—
24. Bronchitis.	M	17	—	—	—	—	—	—	—	—	—	—	3	6
24. Bronchitis.	F	4	—	1	—	—	—	—	—	—	1	6	2	1

Causes of death at different periods of life during 1966 in the Urban District of Wath-upon-Dearne

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS									
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over	
25. Other diseases of respiratory system.	M	1	—	—	—	—	—	—	—	—	—	1	—	—
26. Ulcer of stomach and duodenum.	F	1	—	1	—	—	—	—	—	—	—	—	—	—
27. Gastritis, Enteritis and diarrhoea.	M	1	—	—	—	—	—	—	—	—	—	—	1	—
28. Nephritis and Nephrosis.	F	1	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital malformations.	M	1	—	1	—	—	—	—	—	—	—	—	1	—
32. Other defined and ill-defined diseases.	F	4	—	—	—	—	—	—	—	—	—	—	—	—
33. Motor vehicle accidents.	M	10	1	—	—	—	—	—	—	—	—	—	—	—
34. All other accidents.	F	1	—	—	—	—	—	—	—	—	—	—	—	—
35. Suicide.	M	2	—	—	—	—	—	—	—	—	—	—	—	—
	F	4	—	—	—	—	—	—	—	—	—	—	—	—
	M	2	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	—	—	—	—	—	—	—
	M	94	—	—	—	—	—	—	—	—	—	—	—	—
	F	78	—	—	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
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	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
	M	1	—	1	—	—	—	—	—	—	—	—	—	—
	F	1	—											

Deaths of Infants under 1 year of age

No.	Date of death	Cause of death	Age	Birth Weight	Died	Dom. or Inst. birth
1	25.1.66	1a Bronchopneumonia b Hyperadrenalism 11 Renal tubular acidosis	6 months	6 8	Kendray Hospital, Barnsley	Dom.
2	27.8.66	Cerebral oedema due to pneumococcal respiratory tract infection	3 days	8 12	At home	Dom.
3	4.10.66	Tracheo bronchitis Acute tracheobronchiolitis	2 months	6 3	At home	Inst
4	4.12.66	1a Acute bronchiolitis b Acute infection of respiratory tract	3 months	7 12	At home	Dom.

Wath-upon-Dearne 1966

	Wath-upon- Dearne Urban District	Div. 26	Aggregate West Riding Urban Districts	West Riding Administra- tive County	England and Wales
Population	15,330	110,290	1,238,310	1,748,970	*
Live Births (Crude)	18.4	18.5	17.8	18.0	17.7
Live Births (Corrected)	17.1	18.0	18.2	18.2	
Death Rate—All causes Crude	11.2	11.4	12.9	12.1	11.7
Death Rate—All causes Corrected	13.8	14.5	13.3	12.9	
Infective and Parasitic Diseases—excluding Tuberculosis, but including Syphilis and other V.D.	0.07	0.01	0.03	0.03	*
Tuberculosis:—					
Respiratory	0.00	0.05	0.05	0.05	0.04
Other Forms	0.00	0.00	0.00	0.00	0.01
All Forms	0.00	0.05	0.05	0.05	0.05
Cancer	1.96	1.76	2.16	2.00	2.25
Vascular Lesions of the Nervous System	0.85	1.32	2.02	1.87	*
Heart and Circulatory Diseases	4.11	4.22	4.77	4.48	*
Respiratory Diseases	2.22	1.99	1.88	1.72	*
Maternal Mortality	0.00	0.00	0.31	0.25	0.26
Infant Mortality	14.2	22.1	20.1	19.8	19.0
Neo Natal Mortality	3.5	15.2	13.2	12.6	12.9
Perinatal Mortality	31.0	27.5	25.9	25.1	26.3
Still-Births	27.6	16.4	14.9	14.4	15.4

* Figures not available

DIVISIONAL VITAL STATISTICS

In the discussion that follows it should be remembered that the rates are calculated on relatively small numbers and that variations from year to year may or may not be statistically valid. No conclusions can, therefore, be drawn from minor annual fluctuations but observation of the overall trend of the differing rates over a period of years is of value.

Live Births :

In this division in 1966 113 illegitimate births have been recorded from a total of 2,038 live births. 5.5% of all live births in the division were, therefore, illegitimate. In the previous year the percentage was 4.9% when 102 illegitimate births were registered from a total of 2,070 live births. This rising trend in illegitimate births applies to the whole country but is more pronounced in the larger cities and towns.

For some years now the number of births and the birth rate have progressively increased. The birth rate for the division in 1966 was 18.5 per thousand live births which is exactly the same rate as for 1965. The rate for the administrative county was 18.0, and for England and Wales 17.7. The divisional birth rate is, therefore, slightly higher than that for the county and for the country as a whole.

~~The national~~ increase of population i.e. excess of births over deaths was 813. Nevertheless the Registrar General's estimate of population for mid 1966 for the division as a whole showed a decrease of 110. These figures would indicate that approximately 900 people have migrated from the area during the year, and as there has been an increase in the population of adjoining rural districts it would appear that many families are moving to modern houses recently constructed in the more amenable country districts where they also have the benefit of lower rates.

Deaths :

The death rate for the division from all causes was 11.5 per 1,000 of the population compared with a West Riding rate of 12.1 and 11.7 for England and Wales. Whilst this rate approximates closely to that for the rest of the country and the remainder of the West Riding, the rates for individual causes of death reveal an interesting feature in this division. Whereas the most common causes of death for England and Wales in descending order are as follows, heart and circulatory diseases, cancer, vascular lesions of the nervous system and

respiratory diseases, in this division respiratory diseases now occupy second position instead of fourth. Whilst perhaps this could be attributed to environmental conditions at work, i.e. in the coal mining industry, there is no doubt that atmospheric pollution is an underlying cause.

Infant Mortality :

The infant mortality rate represents the number of children who die under the age of one year calculated per thousand live births. The rate for this division was 22.1 in 1966 which is less satisfactory than last year when the rate was 18.1. The rate for the West Riding County fell in 1966 to 19.8 compared with 20.7 in 1965. The rate for England and Wales in 1966 was 19.0.

This rate is an index of the apparent gain in health of any community and has shown a decline of 130 per thousand since the end of the nineteenth century. The causes of death of the infants who die in this division are representative of the general pattern of infant deaths in England and Wales i.e. respiratory diseases being the most common cause followed by congenital malformations, gastro-enteritis and infectious diseases.

Peri-natal Mortality :

The peri-natal mortality rate includes stillbirths and deaths under one week per thousand live and stillbirths. It provides a more satisfactory guide to the standard of maternal care than the infant mortality rate by itself, as deaths of infants under one week and stillbirths represent the hard-core of infant mortality, and the problem now is to determine the cause of death and decide the best measures to be taken during the ante-natal period to avoid these deaths.

The peri-natal mortality rate in 1966 was 27.5 compared with a rate for the West Riding of 25.1.

Whilst the local rate is slightly higher than for 1965 the general all round improvement has been maintained. The stillbirth rate per thousand live and stillbirths was 16.4 compared with 17.6 in 1965 and 19.6 in 1964. However, the rate still remains slightly higher than that for the West Riding as a whole which was 14.4 in 1966. The commonest causes of death are prematurity, post-natal asphyxia, congenital malformations and birth injuries. Prematurity remains the dominant factor.

Tuberculosis :

The death rate for tuberculosis remains at a satisfactory low level. With a total of 6 deaths in 1966 the rate was 0.05 and the West Riding rate was the same. With the recent influx of susceptible populations to this country efforts at eradication of this disease must continue and such measures as contact tracing, B.C.G. vaccination, the use of diagnostic radiological services and continuing improvements in nutrition must be diligently applied.

Infective and Parasitic Diseases :

The rate for this disease including all infectious conditions except tuberculosis but including venereal disease was 0.1 per thousand and only one death was recorded in the division in 1966. The position is, therefore, a satisfactory one.

Cancer :

In 1966 the death rate for cancer of all sites was 1.76 per thousand of the estimated population (West Riding rate 2.0). A total of 189 deaths was attributed to cancer, 10 fewer than in 1965. Deaths from cancer of the lung total 44 compared with 55 in the previous year. 23.3% of all cancer deaths were due to cancer of the lung and 34 of the 44 deaths were in males.

Cancer of the lung is now the most common type of malignant disease in the country and presents a major health hazard. In England and Wales as a whole one third of the total cancer deaths are from these causes, and the overwhelming majority of physicians have no doubt that this increase is due to cigarette smoking.

Vascular Diseases of the Nervous System :

The death rate from these causes was 1.32 per thousand of the population (West Riding rate 1.87). This was slightly lower than for 1965, although the upward trend in the West Riding as a whole continues. Under this heading deaths are included from such factors as strokes due to cerebral haemorrhage, thrombosis or embolism, and mortality increases progressively with age.

Heart and Circulatory Diseases :

This group represents the most common cause of death in the country. The rate for this division was 4.22 per thousand compared with a rate of 4.48 for the West Riding as a whole. The rate for this area shows only a slight fluctuation from that recorded for 1965.

Included in this group are deaths from coronary disease and angina, and the mortality is appreciably high at the age of 55 years and upwards.

Diseases of the Respiratory System :

As previously reported deaths from respiratory diseases are disproportionately high in this division (17.7% of all deaths) in comparison with other causes of death. The death rate of 1.79 per thousand was higher than for last year in the division (1.42). Of the 223 deaths recorded under this heading more than half i.e. 124, were attributed to chronic bronchitis. This disease is important not only as a cause of death but also as a cause of frequent and repeated illness and absence from work. Atmospheric pollution and cigarette smoking are heavily incriminated in its production and play a far more important role than working conditions, although in a coal mining area this latter factor should not be left out of the count.

Maternal Mortality :

I am pleased to report that there were no maternal deaths recorded in the division in 1966.

SECTION 'B'

General Provision of Health Services in the Area
Staff at 31st December, 1966

Divisional Medical Officer and Medical Officer of Health :
Dr. D. J. Cusiter

Divisional Nursing Officer :
Miss V. Dunford

Senior Assistant County Medical Officers :
Drs. D. M. Bell, S. K Pande, Margaret Bolsover.

Part-time Medical Officers :

Drs. Barbara Demaine,	Jessica Core,
M. F. W. Bajorek,	W. R. Porter,
P. L. Baker,	Mary Scott,
B. R. Baker,	H. H. Smith,
I. Campbell,	J. Wilczynski.

Obstetrician :
Dr. J. C. MacWilliam

Paediatrician :
Dr. C. C. Harvey

Ophthalmologists :
Miss M. A. C. Jones, Dr. S. K. Bannerjee.

Child Psychiatrist :
Dr. J. D. Orme

Child Guidance :
Mr. C. Pritchard, Mrs. R. I. Pilkington.

Health Visitors and Assistant Health Visitors :

Mrs. E. Appleyard,	Mrs. M. Mitchell,
Mrs. J. Brown,	Mrs. N. M. Noble,
Mrs. N. M. Dunford,	Miss M. O'Connor,
Mrs. G. I. Ellis,	Mrs. I. Pettman,
Miss L. Ferneyhough,	Mrs. E. Pocklington,
Mrs. M. Fisher,	Mrs. O. Smith,
Mrs. D. Goddard,	Miss M. Sorby,
Miss M. L. Hampshire,	Miss A. D. Willoughby,
Mrs. M. Jenkinson,	Miss H. Wray,
Mrs. M. M. Knowles,	Mrs. I. E. Milnes,
Mrs. G. Malpass,	Mrs. J. Hanmer,
Mrs. J. V. McLoughlin,	Mrs. I. Senior.

Midwives :

Mrs. D. P. J. Butler,	Miss G. Randall,
Mrs. G. M. Corley,	Mrs. N. Roe,
Miss J. Dearden,	Mrs. A. E. Smith,
Mrs. O. D. Edwards,	Mrs. M. Smith,
Mrs. M. L. Green,	Mrs. D. A. Taylor,
Mrs. E. Gross,	Mrs. V. Tunney,
Mrs. A. Hessam,	Mrs. M. Venables,
Mrs. H. E. Hillery,	Mrs. R. Williams,
Miss K. A. A. Howland,	Miss D. A. M. Spencer,
Mrs. B. Hill,	Mrs. J. Godfrey.
Mrs. V. J. Marley,	

District Nurses :

Mrs. M. Brooks,	Mrs. M. Herring,
Mrs. J. Cox,	Mrs. B. W. Hucknall,
Mrs. H. Dyson,	Mrs. A. Leavers,
Mrs. E. Elsworth,	Mrs. M. McCormack,
Mrs. R. Fairman,	Mrs. A. E. Moore,
Mrs. E. Firth,	Mrs. M. Probert,
Miss E. Gill,	Mrs. K. Roebuck,
Mrs. I. Goldsbrough,	Mrs. M. Waldron,
Mrs. N. Harrison,	Mrs. J. Wilson.

Mental Welfare Officers :

Mrs. F. H. Redman,	Miss D. Bailey.
Mr. R. N. Halliday,	

Training Centre :

Supervisor : Mrs. P. M. Winstanley

Mrs. J. Cavill,	Mrs. M. Gray,
Mr. D. Beevers,	Miss P. Peart,
Mr. T. Garbett,	Mrs. S. E. Norburn,
Mrs. E. Naylor,	Mrs. M. Rowbotham.
Mrs. I. Ardron,	

Administrative and Clerical Staff :- Senior Clerks :

Mr. P. Goddard,	Mr. A. Wilkinson.
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Sectional Clerks

Mr. E. K. New	Mr. H. Haigh.
Mrs. D. Billington.	

Clerks :

Mrs. J. Gwynnette,	Mrs. H. Shirley,
Mrs. K. S. Hickling,	Mrs. P. A. Sturman,
Mrs. H. Mangham,	Miss S. A. Winder,
Mrs. A. Mann,	Miss S. Bennett,
Mrs. F. Shaw,	Miss J. Worton.

Home Helps :

174 home helps

LOCAL HEALTH AUTHORITY SERVICES

Care of Mothers and Young Children - Section 22

Ante-Natal Clinics :

C.W.C. Welfare Avenue, Conisbrough.	Tuesday 2 - 4 p.m.	Dr. J. C. MacWilliam
C.W.C. Church Road, Denaby Main.	Wednesday 10 a.m. - 12 noon	do.
C.W.C. Welfare Park, Goldthorpe.	Thursday 2 - 4 p.m.	do.
C.W.C. Adwick Road, Mexborough.	Wednesday 2 - 4 p.m.	do.
C.W.C. Barbers Avenue, Rawmarsh.	Thursday 10 a.m. - 12 noon	Dr. Mary Scott
C.W.C. Rock House, Swinton.	Thursday 10 a.m. - 12 noon and 2 - 4 p.m.	Dr. H. H. Smith
C.W.C. off Houghton Road, Thurnscoe.	Friday 10 a.m. - 12 noon	Dr. J. C. MacWilliam
C.W.C. Church Street, Wath-upon-Dearne.	Friday 2 - 4 p.m.	Dr. Margaret Bolsover

Attendances :

Clinic	No. of patients who attended	No. of Attendances
Conisbrough ...	48	254
Conisbrough G.P. Clinic...	147	801
Denaby Main ..	104	617
Goldthorpe ...	123	395
Mexborough ...	57	335
Mexborough G.P. Clinic...	93	511
Rawmarsh Barbers Ave.	144	687
Rawmarsh Monkwood ..	13	100
Swinton ...	166	890
Thurnscoe ...	26	205
Wath-upon- Dearne ...	75	437
TOTAL	996	5,232

I am grateful for the co-operation and support received from Dr. J. C. MacWilliam who is Medical Officer in charge of the ante-natal clinics in the Conisbrough, Mexborough and Dearne areas and also holds an appointment as Senior Hospital Medical Officer at the Montagu Hospital, Mexborough.

There were 2,038 live and stillbirths in the divisional area in 1966 and 69% of all expectant mothers in the area attended the local authority ante-natal clinics at some time during their pregnancy.

Ante-Natal Relaxation Classes :

Relaxation classes are held at 7 centres which are listed below.

Clinic					No. of attendances
Goldthorpe	...	...	...	...	213
Mexborough	...	...	...	...	29
Rawmarsh	...	...	...	...	549
Swinton	...	...	...	...	256
Thurnscoe	...	...	...	...	217
Wath-upon-Dearne	...	...	...	...	363
Conisbrough	...	...	...	...	346
TOTAL					1,973

Family Planning Clinics :

The Mexborough branch of the Family Planning Association have the use of the Child Welfare Centre at Mexborough for their clinics. In addition to a grant from the West Riding County Council during 1966 the branch also received a donation of £20 from the Wath-upon-Dearne Urban District Council to help with problem family mothers in that area. Close co-operation between our health visitors and the family planning staff was maintained particularly with regard to this group of patients. Sessions are held each Tuesday evening from 6.15 p.m. to 7.30 p.m. with the exception of the month of August.

Forty-five sessions were held at which a total of 454 women attended. 178 of these were new patients.

Facilities were also available at the clinic for cervical smears to be taken as from April 1966 and 145 were taken during the nine months.

Infant Welfare Clinics :

C.W.C. Conisbrough Monday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Denaby Main Tuesday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Goldthorpe Monday 2 - 4 p.m.	Dr. B. R. A. Demaine
C.W.C. Mexborough Tuesday 2 - 4 p.m. Thursday 2 - 4 p.m.	Dr. B. R. A. Demaine Dr. W. R. Porter
C.W.C. Rawmarsh (Monkwood) Thursday 2 - 4 p.m.	Dr. D. M. Bell
C.W.C. Rawmarsh (Barbers Avenue) Tuesday 2 - 4 p.m.	Dr. Jessica Core
C.W.C. Swinton Monday 2 - 4 p.m.	Dr. I. Campbell
C.W.C. Thurnscoe Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. J. Wilczynski Dr. G. C. McGlone
C.W.C. Wath-upon-Dearne Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. D. M. Bell (for both sessions)
C.W.C. Kilnhurst Wednesday 2 - 4 p.m.	Dr. Jessica Core

Attendances :

Centre	No. of individual children who attended	Total No. of Attendances	
		Under 1 year	Over 1 year
Conisbrough	368	2683	486
Denaby Main	328	838	1109
Goldthorpe	420	1615	1213
Kilnhurst	219	648	1164
Mexborough	642	4756	1343
Monkwood	320	564	725
Rawmarsh	538	1288	1020
Swinton	764	2042	2765
Thurnscoe	749	2213	3145
Wath-on-Dearne	888	1944	2935
	5236	18591	15905

Attendances for 1966 showed an increase of 8% over the figures for 1965.

The increase is mainly in infants over one year of age. The number of individual children attending the clinics also showed a 19% increase over the previous year.

Infant Welfare clinics provide facilities for the examination of children of varying ages and for immunisation and vaccination. The opportunity is also taken by the health visitor to introduce health education activities during these sessions. A recommended range of proprietary foods and National Welfare foods are on sale at all clinics.

Premature Infants :

A premature infant is one which weighs $5\frac{1}{2}$ lbs or less at birth. This standard is a convenient one since the medical care of small babies whether they be premature or immature is along the same lines. It must be noted, however, that not all babies of this weight bear the same hazard. Observations on the risks of prematurity are included elsewhere in the preface to this report.

As in 1965 there were 149 premature births including eight sets of twins; 16 were stillborn. 18% of the premature babies were born at home and 82% in hospital. Of those born at home 4 weighed under 4 lbs, 22 premature babies died in the first four weeks of life; all in hospital.

PREMATURE INFANTS BORN IN 1966

District	Born Alive			Stillbirths			No. removed to Hosp. After Birth	No. who survived 28 days		
	At Home	In Hosp.	Total	At Home	In Hosp.	Total		Born at Home	Born in Hosp.	Total
Conisbrough	4	18	22	—	2	2	1	3	13	16
Dearne	9	28	37	—	3	3	3	8	25	33
Mexborough	1	11	12	1	1	2	—	1	10	11
Rawmarsh	5	29	34	1	2	3	1	4	24	28
Swinton	1	11	12	—	2	2	—	1	6	7
Wath-upon-Dearne	5	11	16	—	4	4	—	4	12	16
TOTALS	25	108	133	2	14	16	5	21	90	111

Care of the Unmarried Mother and Child :

130 illegitimate births were registered during 1966, representing 5.5% of all births.

Marital Status :

(1) Married :

(a) with previous illegitimate children ...	11
(b) without previous illegitimate children ...	14

(2) Single :

(a) with previous illegitimate children ...	10
(b) without previous illegitimate children ...	55

(3) Widowed or Divorced :

(a) with previous illegitimate children ...	1
(b) without previous illegitimate children ...	2

Age incidence :

(1) Under 15 ...	2
(2) Age 15 - 19 ...	35
(3) Age 20 - 24 ...	26
(4) Age 25 - 29 ...	15
(5) Age 30 - 39 ...	13
(6) Age 40 and over ...	2

The County Council scheme for the care of the unmarried mother and her child provides for financial responsibility to be accepted by the County Council for the maintenance of these unmarried mothers in welfare homes for a period of thirteen weeks, excluding the lying-in period. I am grateful to the social workers of the Doncaster and Sheffield Diocesan Moral Welfare Council for their co-operation and help during the year.

Problem Families :

Three meetings of the co-ordinating committee were held during 1966. The committee meets under the chairmanship of the Divisional Medical Officer and consists of representatives from the Education Department, Welfare and Childrens Departments, Urban District Councils, Ministry of Social Security, National Coal Board, Probation Service, N.S.P.C.C. and Health Department.

The number of cases which can be adequately discussed at each meeting is limited and emphasis is therefore placed on those in which the County Council is making a rent guarantee

to the Urban District Council. The latter scheme provides breathing space in which the committee are able to make an assessment as to whether the parents are ready to accept and make use of the opportunities offered by various departments to establish themselves, or whether they are completely indifferent to the needs of their families. Whilst, however, the majority of cases assisted in this way have managed to pay their rent subsequently and show some improvement in their standards, other families have finally been evicted when the rent guarantee was withdrawn. By arrangement with the Treasurers of the Urban District Councils reports of rent arrears are submitted frequently to the Divisional Medical Officer relating to tenants who currently have their rent guaranteed by the County Council

MIDWIFERY — SECTION 23

Twenty-one midwives were employed in the divisional area at the 31st December 1966. Although the authorised divisional establishment is 24 no action was taken to replace staff who retired or resigned as this was not justified.

The number of home confinements continued to decrease and only 34% of the 2,072 live and stillbirths in the division during 1966 were delivered at home. It is pleasing to note that the ratio of institutional births in this area is now nearing the 70% recommended by the Cranbrook Committee in its report on the maternity services.

General practitioners were present at 106 of the 697 confinements which took place at home and medical aid was requested on 60 occasions. Midwives attended 147 mothers who were delivered in institutions but discharged after forty-eight hours, a further 172 who were discharged up to and including the fifth day and 252 who were discharged between the fifth and tenth day. The average number of confinements attended by each midwife during 1966 was 33. All midwives are authorised to use their private motorcars on official business and in common with other local authorities the County Council operate an assisted car purchase scheme for staff qualified as 'essential users'.

I would like to record my thanks to Miss Vernon, Mrs. Stott and Mrs. Tunney who retired during the year after many years of faithful service in the area.

Refresher courses were arranged for those members of the staff who were required to attend in accordance with Section

'G' of the rules of the Central Midwives Board, and five midwives attended such courses in 1966. The County Council also provide courses of instruction for midwives at their Adult College at Grantley Hall, and two midwives from this division attended during the year.

In 1966 a portable incubator built to specification laid down by the County Council was put into use in the divisional area. This can be heated from the battery of the ambulance and is used for the transport of small babies from home to hospital or between one hospital and another. All midwives were instructed in its use and each midwife is called upon in turn to arrange for its maintenance and ensure its readiness in case of need. Two sorrento cots are also kept at the ambulance depot to facilitate the nursing of small babies at home or for other emergency use.

Visits :

		Ante-Natal	Post-Natal
Domiciliary cases ...	...	5,434	10,073
Hospital cases ...	...	1,481	2,757
		<hr/>	<hr/>
		6,915	12,830
		<hr/>	<hr/>

HEALTH VISITING — SECTION 24

The health visitor's duties have undergone great change during recent years. Possibly only about one third of her time is now devoted to the routine visiting of infants, and she is more concerned with care and after-care, prevention of illness and health education for the family as a whole.

All health visitors in the division are attached to general practitioners but the extent of this liaison varies from practice to practice. In some areas this consists of only weekly visits by the health visitor to the surgery and occasional telephone contact, whilst at the other end of the scale many doctors rely heavily on the health visitor to seek solutions to the many social problems of their patients. With the shortage of geriatric beds in the area and the continued lack of places in residential accommodation it follows that the main problems are with the care of the aged patient.

Three health visitors attend five hospitals in the area on liaison duties and two other health visitors attend in similar capacity at the chest clinic. Further details of these duties are included later in this report under the heading of Care and After-care.

The health visitors in this division have a dual role of school nurse and, therefore, assist at school medical inspections, vaccination and immunisation sessions in school, carry out cleanliness surveys and routine audiometry testing and many other duties which fall to the lot of the school nurse.

All immigrants entering the area and notified to this department by Sea and Airport Authorities are visited by the health visitor who gives advice regarding the medical and other essential services available to them. In this connection use is made of a card printed in English, Hindi, Urdu and Arabic.

All home accidents reported to the department by the various hospitals are investigated by the health visitor to ascertain the cause of the accident and advise on suitable measures to prevent recurrence.

In September 1966 a new training school for health visitors was opened in Sheffield. Two of our staff are designated as fieldwork instructors and they supervise the field training of students attending both the Sheffield and Leeds health visitor training centres. The department also helps with the training of student hospital nurses from the Rotherham training school. Five health visitors from this division attended Refresher Courses at the County Council Adult College at Grantley Hall during 1966, and eight attended a course of instruction in the Ascertainment of Deafness in Young Children conducted by Professor and Lady Ewing of Manchester University. All of the qualified health visitors in this division have now attended such a course. Other lectures have been arranged for the staff and regular divisional meetings are held to discuss current topics and common problems.

There are 24 nurses employed in the health visiting service at the 31st December 1966: 18 of whom were fully qualified.

The following is an analysis of the work undertaken by health visitors during 1966.

Visits :

Expectant mothers	...	...	...	132
Children under 1 year	...	...	6,062	
Children aged 1 - 2 years	...	...	4,793	
Children aged 2 - 5 years	...	...	9,024	
			<hr/>	19,879
Tuberculosis households	...	...		484
Other cases	...	...	...	9,997
School health cases	...	...	...	1,022
Ineffective	...	...	...	4,015
			<hr/>	
			Total	35,529
				<hr/>

Clinic and School Sessions :

Maternity and Child Welfare	...	...	...	2,036
Ultra Violet Light...	...	...	...	—
Specialist - Chest	...	...	...	9
Specialist - Other	...	...	...	238
School Health	...	...	...	1,022
			<hr/>	
			Total	3,305
				<hr/>

HOME NURSING — SECTION 25

The staff of the home nursing service at 31st December 1966 consisted of 18 full time and one part-time nurse. The staff who are able to drive cars are either authorised to use their own vehicles on official business or have been provided with County owned vehicles.

A day and night sitting service has been established to provide relief for relatives nursing terminal illnesses. The service in this division has mainly been confined to night work and the majority of cases nursed were terminal cases of cancer. In 1966 five cases were helped and 208 hours of assistance was given at a cost of £62 10s. 0d.

The following are statistics relating to the work of the home nurse in 1966. It will be noted that they made 53,843 visits to 1,112 patients. Whilst the number of patients nursed fell by 150 compared with 1965, the number of visits showed an increase of 4,800. Over half of the patients were aged 65 or over and they were visited on 34,549 occasions. 572 patients had more than 24 visits each during the year.

Case Summary :

Classification	No. of cases attended	No. of visits made
Medical	1,345	42,968
Surgical	334	8,518
Infectious Diseases	11	101
Tuberculosis	18	1,233
Maternal complications	58	510
Other	46	513
TOTALS:	1,812	53,843
Patients included above who were aged 65 or over	1015	34,549
Children included above who were under 5 or less	46	468
Patients included above who have had 24 visits or more	572	37,412

Of the total of 1,812 patients nursed during the year 1,245 cases were completed by the 31st December 1966. The main categories of diseases for which these patients were treated included respiratory diseases 212 (i.e. bronchitis, pneumonia but not tuberculosis), anaemias 88, complications of pregnancy 50, skin diseases 71 (i.e. boils, carbuncles, etc.), constipation 67, diseases of the heart and arteries 107. The treatment consisted of injections in 484 cases and general nursing in 434 cases. Antibiotics were administered by injection in 259 cases and drugs for anaemias accounted for 119 cases in which injections were given. 7,435 visits were made by home nurses for the sole purpose of giving injections.

VACCINATION AND IMMUNISATION — SECTION 26

Smallpox Vaccination

Age at 31/12/66	Under 1 1966	1—4 1962/65	5—14 1952/61	15 or over before 1952	Total
No. Vaccinated					
Dearne	1	83	30	24	138
Conisbrough	—	57	1	2	60
Mexborough	2	55	11	41	109
Wath	—	63	33	78	174
Swinton	1	94	19	27	141
Rawmarsh	2	73	22	7	104
Total	6	425	116	179	726
No. Re-vaccinated					
Dearne	—	—	12	33	45
Conisbrough	—	—	—	—	—
Mexborough	—	—	4	24	28
Wath	—	—	1	15	16
Swinton	—	2	3	12	17
Rawmarsh	—	1	4	4	9
Total	—	3	24	88	115

The number of persons vaccinated in 1966 shows an increase of over 100% on the total for 1965. It is pleasing to note 425 infants between the ages of one and four years were vaccinated against a total of 260 for the previous year.

Diphtheria Immunisation

Urban District	No. of children primarily Immunised			No. of children given booster doses during 1966
	Under 5 yrs.	5—14 years	Total	
Conisbrough	248	—	248	143
Dearne	332	—	332	4
Mexborough	243	1	244	103
Wath	287	8	295	70
Swinton	270	13	283	152
Rawmarsh	262	6	268	66
Total	1642	28	1670	538

The immunisation rate in this division is at a satisfactory level and no cases of diphtheria have been reported for some years.

Poliomyelitis Vaccination

	No. of persons completely Vaccinated during 1966		Total persons completely Vaccinated	
	3 Dose	4 Dose	3 Dose	4 Dose
Children born in years 1951 — 1966	5677	946	31610	8774
Young Persons	551	61	15669	2422
TOTAL	6228	1007	47279	11196

Vaccination against poliomyelitis in this division is carried out solely by means of oral vaccine and no supplies of salk vaccine for use by injection were obtained during 1966.

Last year I reported on the efforts made in the division to achieve a higher rate of immunisation amongst school children. The 98% acceptance rate has been maintained amongst school children and concerted efforts by the health visiting staff have resulted in an increased rate of vaccination amongst pre-school children. Of the estimated child population in the division of 33,000, 31,610 have been completely vaccinated representing a rate of 96%.

AMBULANCE SERVICE — SECTION 27

The local ambulance station is situate at Dunford House, Wath-on-Dearne adjacent to the Divisional Health Office. The Station Officer Mr. H. Godly has kindly supplied me with the statistics listed below. The staff of 31 includes 23 male driver-attendants, one female driver-attendant, 5 male shift leaders and 2 clerk/telephonists :—

No. of patients conveyed	42,659
No. of journeys	7,026
Total mileage 1.1.66 to 31.12.66	214,337

Details of journeys :

No. of patients to out-patient clinics	33,721
No. of patients for admission to hospital (2,126 emergencies)	3,798
No. of patients for discharge from hospital	2,946
No. of patients transferred from hospital to hospital	1,056
No. of patients from accidents	838
Total	42,359

There are 8 vehicles stationed at Wath-on-Dearne all equipped with short wave radio communication sets.

One third of the staff have received two weeks training at the new Ambulance Training School, Elm Bank, Cleckheaton. The syllabus of this training course includes all aspects of ambulance aid, anatomy and physiology treatment, artificial respiration and driving skills.

The ambulance depot telephone number is Wath 2234/5 night and day, and any person can order an ambulance for an accident or emergency childbirth where it is apparent that emergency hospital treatment is required. The Women's Voluntary Service are also called upon during emergencies to convey sitting patients.

Out-patients form the great majority of ambulance patients, and the number of patients conveyed during 1966 showed an increase of 4,000 on the previous year. The number of journeys undertaken was 300 more than in 1965 and the mileage increased by 8,000 miles.

PREVENTION OF ILLNESS—CARE AND AFTER CARE

SECTION 28

Nursing Equipment in the Home

1,300 issues of various forms of nursing equipment were made in 1966. A full range of smaller items is readily available from the home nurse or from stocks held at child welfare centres. Larger items of equipment which are not immediately available can be obtained at reasonably short notice.

More and more use is made of disposable items of equipment.

Hospital After-care

The following hospitals are attended by health visitors each week :—

Montagu Hospital, Mexborough

Fullerton Hospital, Denaby Main

Wathwood Hospital, Wath-upon-Dearne

Doncastergate Hospital, Rotherham

Moorgate Hospital, Rotherham

Tuberculosis After-care

A close liaison is maintained between this department and Dr. J. D Stevens, Consultant Chest Physician at Mexborough Chest Clinic. Miss L. Ferneyhough a health visitor from Thurnscoe visits the Chest Clinic at regular intervals for the purpose of exchanging information regarding notified cases and the follow-up of contacts. A register is maintained in the Divisional Office as a result of this liaison, to which interested members of the staff have access. A second health visitor Mrs. G. I. Ellis attends the weekly session held at the Chest Clinic for children. Patients from the Rawmarsh Urban District are seen at Rotherham Chest Clinic (Consultant Chest Physician Dr. A. C. Morrison) and a health visitor from a neighbouring division acts as a link with this clinic.

202 new contacts were examined at Mexborough Chest Clinic in 1966 as a result of the follow-up of 22 newly notified cases of tuberculosis. 28 were men, 56 women and 118 children.

Following the discovery of a case of primary tuberculosis in a school boy as a result of heaf testing for B.C.G. vaccination, 31 immediate contacts and 24 school staff were followed up. 23 of the pupils were heaf negative and were given B.C.G. vaccination followed by chest x-ray at the Mass Radiography Unit where all the teaching staff attended too; all proved to be clear. Eight pupils who were heaf positive were referred to the Chest Clinic for further investigation but nothing abnormal was detected, although some are still under observation.

No employment difficulties have been encountered in respect of known cases of tuberculosis.

2,193 children were offered heaf testing during 1966 and an acceptance rate of 88% was achieved; an increase of 8% over 1965 and 18% over 1964. The incidence of negative reactors in the schools was within the national average. The number of positive reactors referred for chest x-ray i.e. grade 3 or 4, was also within normal limits.

The South Yorkshire area Mass Radiography Unit held public sessions at the Baths Hall Denaby Main, Miners Welfare Hall, Conisbrough, Child Welfare Centre, Mexborough, C.W.S. Factory, Bolton-on-Dearne, N. Corah Ltd., Bolton-on-Dearne and at the Welfare Hall, Goldthorpe during 1966. There were 6,064 x-rays carried out and a total of 254 abnormalities were discovered.

The following is a summary of the abnormalities discovered :—

Abnormalities of the Bony Thorax and Soft Tissues—Congenital	14
Bacterial and virus infections of the lungs.....	9
Bronchiectasis	8
Emphysema	8
Pulmonary fibrosis—non-tuberculosis.....	27
Pneumoconiosis—not previously certified.....	65
Pneumoconiosis—previously certified.....	10
Benign tumours of the lungs and mediastenum	1
Carcinoma of the lung and mediastenum.....	3
Sarcoidosis and collagenous disease.....	2
Pleural thickening of calcification— non-tuberculosis	21
Abnormalities of the diaphragm and oesophagus; congenital and acquired.....	2
Congenital abnormalities of heart and vessels...	3
Acquired abnormalities of heart and vessels.....	32
	—
	205
	—

The Rotherham and Doncaster Care Committees have provided personal clothing for families where a need exists and when the recommendation is supported by the Chest Physician.

All the district councils allow priority of housing on the recommendation of the Medical Officer of Health for active cases of pulmonary tuberculosis where the Medical Officer considers that their present housing accommodation is inadequate.

Chiropody :

The following is a summary of treatments provided during 1966 by the various agencies or by direct service :—

Summary of treatments :

Voluntary Association	Total Sessions	No. of Patients treated			No. of attendances
		Domi-ciliary	Non-Domi-ciliary	Total	
Bolton-on-Dearne O.A.P. Association	190	129	383	512	2532
Goldthorpe O.A.P. Association					
Thurnscoe O.A.P. Association					
Thurnscoe W.V.S.					
Conisbrough & Denaby Main O.A.P. Welfare Committee	110	113	304	417	1271
Mexborough Old Folk's Welfare Committee.....	207	93	367	460	2340
Swinton Aged Peoples Welfare Committee.....	134	75	267	342	1572
Rawmarsh Aged Peoples Welfare Committee.....	220	194	388	582	2741
Wath-on-Dearne Aged Peoples Welfare Com'tee	154	171	260	431	2209
Total	1015	775	1969	2744	12665

Cervical Cytology :

Arrangements were made in April 1966 with Dr. G. D. Powell, Pathologist, Moorgate General Hospital, Rotherham to accept smears from patients in this area. The service commenced in a small way in June 1966 but the response so far has been disappointing.

This measure is designed to detect changes in the cells of the cervix which if left undiscovered might possibly lead to malignancy at a later date. At the same time as the smear is taken examination is made of the abdomen, pelvic organs and breasts.

Seventeen sessions were held at three centres at which 95 women attended. There were no positive or doubtful smears but one patient was referred to her family doctor for investigation of a breast abnormality.

Phenylketonuria :

Every effort is made by the health visitor to test babies for phenylketonuria between the ages of four to six weeks. In 1966 2,079 babies were tested, one of which showed a positive reaction. The diagnosis was not confirmed as positive on serum testing at the hospital laboratory.

National Assistance Act, 1948 - Section 47

This section of the Act is concerned with the compulsory removal of persons in need of care from their homes on a Court Order or in an emergency on an Order signed by two medical practitioners and a Justice of the Peace.

Such person may be removed to a County Home or hospital, provided that all the sections of the Act are satisfied. It was not necessary to take any action under this section in 1966.

Joint Wardens Schemes for the supervision of the aged :

The scheme, organised jointly by the county council and the local district councils, provides for the supervision by wardens of aged persons, both in units or other purpose-built accommodation and in ordinary dwellinghouses. The wardens may or may not be resident. In all cases, the wardens are provided with a telephone, an illuminated sign where this is necessary, and are paid a salary, the amount of which is at the discretion of the local district council. In those circumstances where the warden is non-resident, it is their duty to visit one each day and to direct the help of the appropriate agency where this is required. No physical help, other than in an emergency is required of the warden.

During 1966 arrangements were made in some areas for the appointment of wardens to cover persons living in privately owned houses.

Details of all warden schemes including those provided by the district council in their own housing units and privately owned houses are shown below :—

Conisbrough : 2 Wardens Bungalows—

Shepherds Close,
Denaby Main.

Coronation Cottages,
Conisbrough.

Flats, Marchgate,
Conisbrough.

1 Warden for private houses in Denaby
Main.

Dearne :

8 Wardens Bungalows—

Chestnut Grove,
Thurnscoe.
Low Grange,
Thurnscoe.
Market Square,
Goldthorpe.
King Street,
Goldthorpe.
Green Gate Close,
Bolton-on-Dearne.
Goldthorpe Road,
Goldthorpe.
Houghton Road,
Thurnscoe.
Flatlets, Windsor Court,
Thurnscoe.

Mexborough :

4 Wardens Bungalows—

Pitt Street, Mexborough.
Crossgate and
Montagu Street,
Mexborough.
Highwoods Road,
Mexborough.
Oak Close, Mexborough.

2 Wardens Flats—

Maple Leaf Court,
Mexborough.
Hallgate, Mexborough.

There are also 7 wardens for private properties in Mexborough.

Rawmarsh :

1 Warden Bungalow—

Greenfield, Rawmarsh.

Swinton :

6 Wardens Bungalows—

St. Johns Road, Swinton.
St. Mary's Crescent,
Swinton.
Brameld Road Swinton.
Highfield Farm, Swinton.
Meadow View, Kilnhurst
and Kilnhurst Warden
Scheme.

Wath-upon-Dearne : 7 Wardens Bungalows and Flats—

Almond Place,
Wath-upon-Dearne.

Varney Road,
Wath-upon-Dearne.

Cemetery Road,
Wath-upon-Dearne.

Mount Pleasant Road,
Wath-upon-Dearne.

Coleridge Road,
West Melton.

Stokewell Road,
West Melton.

Tennyson Rise,
West Melton.

Meals on Wheels :

This service is provided to persons of pensionable age who are suffering from malnutrition or who are unable to cook their own meals due to disability or illness and have no-one else to cook their meals for them. Containers for the service are provided by the County Council who also subsidise the meals as necessary. The recipient is charged 1s. 0d. per meal.

Urban District	No. of Persons	Frequency	Total meals Weekly
Conisbrough	60	Twice weekly	120
Dearne	48	Four days a week	192
Mexborough	96	Twice weekly	192
Rawmarsh	50	Twice weekly	100
Swinton	48	Twice weekly	96
Wath-on-Dearne	42	Twice weekly	84
TOTALS	344		784

Health Education :

Schools :

A series of at least six health education lectures have been given to female school leavers in all our secondary modern schools. Although the same pattern of lectures are given, the extent of the periods during which they are given varies in different schools.

Whilst one health visitor gives a continuous set of lectures in one term to all leavers, another health visitor may spread her lectures throughout the whole year. This depends on the school programme and on the number of leavers in the school. It is during these periods that parents of school leavers are invited to the school to see some of the films shown to the girls and also to discuss problems of their teenage children with the doctor, the health visitor, the Nursing Officer and the school staff.

As many as 40 parents have been present this year at one session but again this depends on the type of area. During these sessions of health education lectures the students are introduced to the various members of the Public Health team, e.g. Midwives, Home Nurses and Public Health Inspectors. The health visitor also tries to meet parents of children who are admitted to the secondary modern schools. Talks on personal and general hygiene are given to these entrants.

Unfortunately opportunities are not available for the introduction of health education to Grammar School children because of the school syllabus. There are two large grammar schools in this division. The health visitor and the doctor only see these children at school medical inspections where problems can be freely discussed, and should the parents be present they are advised to see the health visitor at any time at the clinic.

We would like to meet parents before children leave the junior school and also to give personal hygiene lectures to girls particularly, but personal hygiene films cannot be shown in schools, as few if any junior schools in this division have a room which can be blacked out.

Sex education is not taught by the public health staff, and there has been no large scale anti-smoking campaign during this year.

Home accident prevention has been the main topic of our programme to school children and to parent group meetings during 1966.

Clinics :

Ante-natal: Relaxation classes combined with health education continue to be held in eight of our ten clinics.

Child Welfare Clinic: Displays and posters with numerous handouts are always in our clinics. We are unable to show film strips or films during our clinic sessions but health visitors hold group discussions.

Mothers Clubs: We have three very flourishing Mothers Clubs which meet fortnightly. One member of the health staff is always present. Towards the end of 1966 another Mothers Club was due to open at Monkwood. Mexborough is the place where a Mothers Club would flourish but due to the General Practitioner surgeries and Family Planning Clinics we are not able to do so. There is no session during the day when the clinic is free.

College of Education :

A series of lectures have been given to the student teachers at the local college.

Mental Health :

The mental health social workers hold a psychiatric social club at Wath Clinic and health visitors are often asked to join in their sessions.

I would like to take this opportunity to thank the Health Education Officer and her staff for all the help that has been given to us during 1966, for the displays, posters, hand-outs, films and filmstrips provided for us in a most efficient manner.

DOMESTIC HELP SERVICE — SECTION 29

Establishment of domestic helps.....	93.25
No. of domestic helps employed at 31.12.66 part-time	174
(equivalent of 90.5 full time)	

Groups receiving assistance :—	No. of Cases	Hours
(1) Maternity (including expectant mothers)	47	1,943
(2) Chronic sick		
(a) aged 65 plus.....	1,265	172,337
(b) aged under 65 and tuberculosis	115	9,940
(3) Others	35	3,508
(4) Mentally disordered	9	613
Totals	1,471	188,341

The provision of domestic help is based on a medical certificate from the family doctor and may be provided for the ill, aged, mentally defective, or to care for young children in the absence of the mother in hospital. The service is also provided when required for expectant mothers before, during, and after confinement.

The home help service is not a free service, each applicant is required to complete a form giving details of their financial circumstances and the charge is assessed after consideration of these details. Persons in receipt of a Supplementary Pension from the National Assistance Board are not charged.

In exceptional circumstances, and where this is authorised by the Divisional Medical Officer and the County Medical Officer, a twenty-four hour service can be provided.

Demand for this service continued to rise during the year and the equivalent of 13 extra full time home helps were required, and additional 20,000 hours of assistance was given compared with 1965.

MENTAL HEALTH SERVICE

Subnormal or Severely Subnormal :

Number under care and guidance	...	...	578
Number of ascertainments	...	...	13
Number attending training centre	...	...	127

Mentally Ill :

Number discharged from psychiatric hospital	...	122
Number requiring after-care	...	566
Number of visits involved for after-care and patients referred from out-patient clinics	...	3,421
Number of cases referred to out-patients psychiatric clinics	...	64
Number referred to rehabilitation centres	...	11
Number referred to Youth Employment Office under 17 years of age	...	8

Out-Patients Clinics :

Monday, Wednesday

Barnsley Beckett Hospital
Consultant, Dr. M. Jeffrey.
Mrs. F. H. Redman attends.

Monday, Thursday

Mexborough Montagu Hospital
Consultant, Dr. N. L. Gittleson.
Mr. R. N. Halliday attends.

Friday

Doncaster Royal Infirmary
Consultant, Dr. M. Jeffrey.
Miss Bailey attends for training purposes.

Mentally subnormal patients not attending training centre :

Males	...	...	...	...	24 working full-time, 1 part-time.
Females	...	...	...	...	15 working full-time,
Males occupied at home	...	...	...	...	29
Females occupied at home	...	...	...	...	42

The need for community care of the mentally disordered is now well established, and the National Health Service Act of 1948 and the Mental Health Act, 1959 together offer ideal opportunities to provide that care in a most comprehensive and informal way.

The hospital plan and the Local Authority Health and Welfare plan together indicate the need, aims and benefits of community care, co-operation, understanding, communication and liaison between all agencies, whether statutory or voluntary will bring about a more complete community service, so balanced, that speedy medical and psycho social treatment will result in the effective rehabilitation of those among us whose misfortune it has been to suffer from a mental illness.

The Psychiatric "Rock" Club which commenced in August 1961 is but one example of how community services can work together. Its success can only be measured by the amount of interest shown by individual club members, coupled with the effective return of many of them to establishing a more rational and meaningful life.

The Club's aim is to meet as many as possible of the needs of the mentally disordered who, living within reasonable travelling distance, are able to reach the Club on their own initiative and where the services of the Club are considered socially to be of therapeutic value. The Club which has 70 members—an average attendance of 45 during the year—demonstrates how many of these needs are being met by group activities in an acceptable setting and where social needs of rehabilitation are given priority.

Meetings are held fortnightly and activities are many and varied, ranging from table tennis, darts and card games to vocational and recreational outings. Amidst all this intensive, yet friendly activity, an informal contact is made by Social Workers, and personal interviews are possible at all times. A good Staff to patient ratio is found necessary and we are fortunate in the invaluable assistance given by Voluntary Associations, e.g. members of the Townswomen's Guild, Youth Club Members of the Trinity Methodist Church and numerous other voluntary helpers.

During the early part of the year it was felt that some patients needed more help than the fortnightly meeting offered. Discussions took place with the Heads of Department of the Rockingham Institute of Further Education and it was arranged to commence a scheme of afternoon sessions where various crafts were introduced, e.g. millinery, dressmaking, art and embroidery, were suggested. Three teachers with a fund of kindness and a tolerance of mental illness were specially chosen. The classes commenced with 18 patients and since June an average of 24 patients have attended these weekly sessions regularly. These patients are now requesting more classes to be arranged and it would appear there is now the need for establishing a day centre to fill this need. In this way an inexpensive yet invaluable service can be offered to Society.

Patients are referred to the Classes and the Club by the Psychiatric Hospital and by Psychiatrists attending Outpatient Departments in the area. In many cases the patients have not required hospital treatment.

Training Centres

There were 127 trainees on the roll at the Training Centre at the 31st December 1966.

Care Unit: This special unit which has provision for 12 severely subnormal patients is proving a great success. Parents are eager to accept this social service which provides care during the day for patients for whom the parents do not

wish permanent hospital care. These patients are cared for by experienced staff one of whom has nursing qualifications. They are conveyed to the centre each day in mini-buses which have been provided with special harnesses and paid escorts provided.

Junior Wing: The junior wing is divided into four groups responsible for children between the ages of 4 to 7 years, classes for the 7 to 9 year olds and thus 9 to 12 year age group followed by a transition class for trainees between the ages of 12 and 16 years. The trainees in this latter group are gaining experience which will benefit them when they are admitted to the senior section which includes the workshops.

Modern methods are used in their training including creative activities and social training. The trainees are encouraged to do a limited amount of shopping and to take walks in local parks with escorts.

Senior Wing: Trainees in the senior wing are introduced as soon as possible to the workshops where during the year production continued of curtains, pinarettes, feeders, bean bags, tea towels, cowrie shell bags, workholder cases, files, library ticket holders, corner flags, first-aid boxes, clothes horses, dolls cots, hollow wooden blocks, playhouse screens, clay boards, test-tube racks, clothes props, etc. for the County Supplies Department. The senior girls are also engaged in laundry work for the centre itself and for the divisional health office, whilst the senior boys are responsible for the maintenance of the grounds at the centre. An incentive pay award is made to all trainees engaged on industrial work over the age of 16 years, ranging from 7s. 6d. per week to £1 per week.

In the junior wing social training is included in the curriculum and outings are arranged during the summer months.

A modern all electric kitchen at the centre provides meals for all trainees for which a charge of 1s. 0d. per day is made. Free meals are allowed where the financial circumstances of the family demand.

There is an active Parent Teachers Association which meets bi-monthly at the centre has benefit by gifts from this organisation as well as the Wath and District and Mexborough branches of the society for mentally handicapped children. The employees of the Manvers Main Coking plant generously donate a portion of their profits from the sale of 'Coal News' to the centre.

SCHOOL HEALTH SERVICE

The staffing position in the school health service during 1966 has been satisfactory; this has been supplemented by the employment of a retired Assistant County Medical Officer and general practitioners on a part-time basis.

Routine school medical inspections have continued with examinations of school entrants, first year secondary pupils and school leavers. Other special medical inspections and re-inspections are arranged as necessary.

Table I

Inspection of School children 1966 :

Entrants	...	...	...	...	...	2,494
First Year Secondary	...	...	...	...	...	1,142
Last Year Secondary	...	...	...	...	...	1,024
						—
Total						4,660
						—
No. of Special Inspections	...	...	...	...	...	1,218
No. of Re-inspections	...	...	...	...	...	42
						—
Total						1,260
						—
Total Inspections						5,920

Physical Condition of Pupils Inspected :

Satisfactory	...	...	...	...	...	99.5%
Found to require treatment	...	...	...	...	...	8.6%

The percentage of pupils found to be satisfactory on examination compares favourably with that for England and Wales and for the County as a whole. The percentage requiring treatment is also about the national average.

Table II

Cleanliness and Head Infestation :

Total no. examinations made for this purpose	19,210
Total no. found infested	528
Total percentage found infested (West Riding 1·9%)	2·7%

Table III

Care of Handicapped Children :

Milton Day School—E.S.N.	100
Residential School—E.S.N.	3
Residential School—Deaf or Partially Deaf ...	15
Residential School—Deaf E.S.N.	—
Residential School—Blind	4
Residential School—Partially Sighted	3
Residential School—Delicate	13
Residential School—Cerebral Palsy	10
Residential School—Physically Handicapped excluding Cerebral Palsy	5
Residential School—Epileptic	—
Residential School—Maladjusted	11
<hr/>	
Total	164
<hr/>	

The number of handicapped children at special schools remains at a constant level although during 1966 the number admitted to residential schools for the delicate and residential schools for the maladjusted increased two fold.

Table IV

B.C.G. vaccination 13 years and older school children :					
No. of children offered testing and vaccination if necessary	...	...	...	...	2,193
No. of acceptances	...	...	...	...	1,893
Percentage of acceptance	...	...	...	...	88.16%
Pre-vaccination Tuberculin Test :					
No. tested	...	...	...	...	1,641
Result of Test :					
No. Positive	...	...	...	...	306
No. Negative	...	...	...	...	1,268
No. Not ascertained	...	...	...	...	67
Percentage Positive	...	...	...	...	20.19%
No. Vaccinated	...	...	...	...	1,268

The acceptance rate for B.C.G. vaccination increased by 9% in 1966 and the level of 88.2% is satisfactory but I would be happier to see a 100% rate as the occasional case of pulmonary tuberculosis amongst adolescents is still being notified.

Table V

Audiometry :					
No. tested	...	...	...	...	1,330
No. with no loss	...	...	...	...	1,175
No. referred to School Audiology Clinic	...	...	...	...	155

The Consultant Paediatrician, Dr. C. C. Harvey is available for consultation and sees cases referred by both the school health service and the family doctors, and I am most grateful for his help during the year. Dr. J. D. Orme is Consultant in charge of the Child Guidance Clinic and his help is invaluable. The division is also fortunate in having the services of Miss M. A. C. Jones, Consultant Ophthalmologist and Dr. S. K. Bannerjee, to whom all visual defects are referred. I am grateful also to the school medical officers both whole and part-time for the performance of their duties during the year.

HOSPITAL SERVICES

The hospital services for the area are administered by the United Sheffield Hospitals, Sheffield Regional Hospital Board, with the following hospital management committees; Sheffield No's. 1, 2 and 3, Rotherham, Barnsley and Doncaster.

General hospital services :

Sheffield Royal Hospital
Sheffield Royal Infirmary
Sheffield City General Hospital
Rotherham Moorgate and Doncaster Gate.
Hospitals
Barnsley Beckett and St. Helen Hospitals
Doncaster Royal Infirmary
Mexborough Montagu Hospital

Infectious Diseases hospital services :

Kendray Isolation Hospital
Doncaster Tickhill Road Hospital
Sheffield Lodge Moor Hospital

Maternity hospital services :

Sheffield Jessop Hospital
Rotherham Moorgate Hospital
Mexborough Montagu Hospital
Barnsley St. Helen Hospital
Listerdale Maternity Home

Chest Clinics :

Mexborough Chest Clinic—Dr. J D. Stevens.
Rotherham Chest Clinic—Dr. A. C. Morrison

Laboratory Services :

Bacteriological examinations are carried out at the Public Health Laboratories at Wakefield (Director: Dr. L. A. Little) and at Sheffield (Director: Dr. E. H. Gillespie).

(Sections 'C', 'D' and 'E' of this report have been compiled by Mr. W. W. Wilkinson, Chief Public Health Inspector.)

SECTION "C"

General Environmental Circumstances of the Area

Inspection of the District

During the year the following inspections were made:

Nature of Inspections				No. of inspections made
Houses for structural defects ...	...	...	...	470
Premises re Nuisances:				
Drainage and sanitary conveniences ...	...	...	...	258
Dustbins ...	...	...	...	121
Offensive accumulations ...	...	...	...	45
Paving of yards and passages ...	...	...	...	10
Vermin and insect pests ...	...	...	...	43
Filthy premises ...	...	...	...	32
Keeping of animal nuisances ...	...	...	...	14
Noise nuisances ...	...	...	...	5
Compulsory improvement of dwellings ...	...	...	...	1
Miscellaneous housing visits ...	...	...	...	107
Observations and visits re smoke nuisances ...	...	...	...	7
Air pollution—visits re measurement of ...	...	...	...	20
Smoke Control area visits ...	...	...	...	227
Visits re refuse collection ...	...	...	...	33
Visits re refuse disposal ...	...	...	...	15
Food shops ...	...	...	...	99
Food hawkers ...	...	...	...	9
Canteens and food preparing premises ...	...	...	...	4
Slaughterhouses ...	...	...	...	19
Meat inspection visits ...	...	...	...	356
Factories and Workplaces ...	...	...	...	7
Tents, vans and sheds ...	...	...	...	21
Rats and mice inspections ...	...	...	...	21
Visits re water supply ...	...	...	...	3
Public swimming baths—water samples ...	...	...	...	53
Drinking water samples ...	...	...	...	13
Visits re infectious diseases ...	...	...	...	1
Visits to hairdressers ...	...	...	...	13
Offices, shops and railway premises ...	...	...	...	33
Miscellaneous sanitary visits ...	...	...	...	20
Owners interviewed ...	...	...	...	3
Scrap metal dealers ...	...	...	...	5
Abandoned motor vehicles ...	...	...	...	15
Allotments ...	...	...	...	6
				2,109

Complaints received

337 complaints were received during the year, showing a decrease of 6 from last year. The complaints have been classified as follows:

Nature of Complaint						Number received
General housing defects	...	...	...	...	...	34
Choked drains	...	...	...	...	...	71
Leaking and defective drains	...	...	...	...	...	6
Defective sanitary conveniences	...	...	...	...	...	8
Accumulation of refuse	...	...	...	...	...	8
Delay in emptying dustbins	...	...	...	...	...	36
Dilapidated dustbins	...	...	...	...	...	8
Infestation of rodents (rats, mice and rabbits)	...	...	...	...	...	97
Insect pests	...	...	...	...	...	21
Burst water pipes	...	...	...	...	...	6
Nuisance from flooding	...	...	...	...	...	5
Smoke nuisances	...	...	...	...	...	3
Noise nuisance	...	...	...	...	...	2
Smell nuisance	...	...	...	...	...	5
Miscellaneous	...	...	...	...	...	17
Animal nuisances	...	...	...	...	...	3
Abandoned motor vehicles	...	...	...	...	...	3
Defective drinking water	...	...	...	...	...	2
Dirty houses	...	...	...	...	...	2
						<hr/> 337 <hr/>

Particulars of notices served under the Public Health Acts and the West Riding County Council (General Powers) Act, 1951.

Number of written informal notices served during the year requiring nuisances and housing defects to be remedied	...	...	...	...	146
Number complied with	...	...	...	...	141*
Number of verbal intimations given	...	...	...	...	72
Number complied with	...	...	...	...	80*
Number of statutory notices served re nuisances (excluding housing repairs)	...	...	...	...	34
Number complied with by owner or occupier	...	...	...	...	39*
Number of statutory notices served requiring housing defects to be remedied	...	...	...	...	7
Number complied with by owner	...	...	...	...	7
Number of notices where work executed by local authority in default of owner (to remedy housing defects and other nuisances)	...	...	...	...	2
Number of notices where works executed by owner after institution of legal proceedings	...	...	...	...	3

*includes notices served prior to 1966, but complied with in 1966

The statutory notices served during the year include notices served under the powers contained in the Public Health Act, 1936, sections 24 (maintenance of sewers), 83 amended by section 35 Public Health Act, 1961 (cleansing of filthy premises), 75 (removal of worn out dustbins), 93 abatement of nuisances), and under the Public Health Act, 1961, section 17 (cleansing of choked drains), 27 (requiring owner to remove rubbish resulting from demolition).

Nature of Defects Remedied under Public Health Acts

Choked drains cleansed	64
Drains reconstructed or repaired	20
Watercloset structures repaired	11
Watercloset fittings repaired or renewed	21
Dustbins renewed	42
Accumulations removed	39
Insect infestations cleared	2
Rodent infestations cleared	159
Chimney stacks repaired	14
Roofs repaired	16
Eaves gutters and fallpipes repaired or renewed	11
Walls re-pointed	9
Wall and ceiling plaster repaired	21
Window frames, doors and door frames repaired	20
Fireplaces repaired or renewed	9
Smoke nuisances abated	2
Burst water supply pipes repaired	9
Sinks renewed	3
Sink waste pipes renewed	3
Fractured walls repaired	2
Floors repaired	7
Yards and passages paved	1
Miscellaneous defects remedied	13
Filthy premises cleansed	20
Scrap cars removed	1
Itinerant caravans removed	6
Houses demolished	14
Animal nuisance abated	1

Sanitary Accommodation

The following table shows the number of dwelling-houses and other buildings in the five wards of the District and the sanitary accommodation provided thereat:

Wards	Dwelling Houses	Dwelling Houses with Shops (incl. in Col. 1)	Shops and Factories	Miscellaneous Buildings	Privies	Water Closets	Dustbins	Cesspools	Slop Closets	Chemical Closets
Central	1584	45	52	40	1	2371	1636	4	1	7
East	720	53	17	15	5	917	735	5	—	4
Wharnccliffe	1029	26	31	16	—	1206	1100	1	—	—
Winterwell	629	42	26	15	—	781	669	—	—	—
Melton	1299	25	27	18	—	1449	1318	1	1	—
Totals	5261	191	153	104	6	6724	5458	11	2	11

Drainage and Sewerage

Six houses in the District are not drained to a public sewer because a sewer is not available within a reasonable distance.

A number of complaints were received concerning the flooding with sewage of low lying land which occurred during periods of heavy rain.

From time to time some alteration in the efficiency with which certain drains and sewers function is noticeable, and alterations in ground levels arising from mining subsidence appears to be the cause.

Caravans

One site in the District is licensed for the accommodation of six caravans which are for the use of families temporarily displaced from their houses because of mining subsidence damage. There are no other licensed sites and only very rarely was any request received for a site for a residential caravan. Occasionally, itinerant caravan dwellers, who were mostly engaged in scrap metal collection, stationed their caravans and other vehicles on unfenced land. Complaints concerning them were usually received at the office soon after their arrival, and the usual and expected efforts of persuading them to move on as quickly as possible were undertaken. One or two sites, previously used by the itinerant caravan dwellers have been rendered unavailable to them by development, fencing the land or otherwise rendering the land less accessible.

Noise Nuisances

Increasing attention has been required in connection with nuisances from noise. Checks have been made on the operation of vehicle hooters and loud speaker chimes in connection with trading vehicles used in the streets, and action taken where necessary. Fortunately, the District is not one of those where industrial premises and residential property are closely intermixed, and complaints of noise and vibration from such sources are not therefore frequent. They do arise from time to time, however, and serve to indicate the need for control and for preventing use of premises in residential areas for trade or business which may give rise to complaints.

Pest Control

As in previous years, steps were taken to deal with bee swarms, wasps nests, infestations by cockroaches, earwigs, woodworm, etc., when complaints were received from occupiers of premises.

For the extermination of rats and mice, treatment of dwellinghouses, treatment of allotments and small business premises is carried out free of charge. During the year, the Council also authorised free treatment of agricultural premises where the occupiers were willing to co-operate by taking action to reduce the possibility of re-infestation.

Most of the infestations dealt with were small infestations, and so far as rats are concerned were mainly outside buildings in gardens, dyke banks, hedgerows, tips, sewage works, etc.

The public sewers were test-baited to ascertain the degree of rat infestation, and treatment of infested parts of the sewerage system carried out. The sewers do not appear to carry a very large rat population but more trouble is experienced at the sewage works from time to time. The construction and maintenance of sewage works to reduce the degree of rat infestation would be a useful contribution to the efforts made in rodent control.

Agricultural land, particularly that under cereal crops, and the farm premises in the District, seem to be the main reservoirs from which infestations around dwellinghouses occur.

The following table gives particulars of the numbers of premises dealt with:

Type of premises	RATS Number of premises:			MICE Number of premises:		
	In-spected after notifi-cation	Found to be infested	Treated by L.A.	In-spected after notifi-cation	Found to be infested	Treated by L.A.
Non-Agricultural	162	135	135	13	12	12
Agricultural	3	3	3	—	—	—
	Routine inspect-ion	Found to be infested	Treated by L.A.	Routine inspect-ion	Found to be infested	Treated by L.A.
Non-Agricultural	10	8	8	—	—	—
Agricultural	1	1	1	—	—	—
Totals	176	147	147	13	12	12

Hairdressers Premises

25 hairdressers and their business premises are registered with the Council in accordance with the provisions of the West Riding County Council (General Powers) Act, 1951. The standard of equipment has greatly improved since registration was first required.

Factories Act 1961

Seven inspections of factory premises were made during the year and the table below gives particulars of the inspections and the action taken.

There are no outworkers in the district.

1. Inspections for purposes of provisions as to health

Premises (1)	No. on Register (2)	Number of		
		Inspection (3)	Written Notices (4)	Occupiers Prosecuted (5)
(1) Factories in which Secs. 1 2, 3, 4 and 6 are to be enforced by local authorities	3	—	—	—
(2) Factories not included in (1) in which Section 7 is enforced by the local authority	52	5	1	—
(3) Other premises in which Section 7 is enforced by the local authority. (Excluding outworkers premises)	4	2	—	—
TOTAL	59	7	1	—

2. Cases in which defects were found

Particulars (1)	Number of cases in which defects were found				No. of cases in which prosecutions were instituted (6)
	Found (2)	Re-medied (3)	Referred to H.M. Inspector (4)	Referred by H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable Temperature (S.3)	—	—	—	—	—
Inadequate Ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective.....	2	2	—	2	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	—	—	—	—	—
Total	2	2	—	2	—

Offices, Shops and Railway Premises Act, 1963

Particulars included in the annual report for 1966, submitted to the Minister of Labour in accordance with section 60 of the Act, are given below.

TABLE A. Registration and General Inspections.

Class of premises (1)	Number of premises registered during the year. (2)	Total number of registered premises at end of year. (3)	Number of registered premises receiving a general inspection during the year. (4)
Offices	2	27	7
Retail shops	2	57	1
Wholesale shops, warehouses	—	2	—
Catering establishments open to the public, canteens.	—	10	1
Fuel storage depots	—	—	—
Totals	4	96	9

Table B—Number of visits of all kinds by inspectors
to registered premises 33

Table C

	Class of Workplace (1)	Number of persons employed (2)
Analysis of persons employed in registered premises by workplace	Offices	412
	Retail shops	184
	Wholesale departments, warehouses	4
	Catering establishments open to the public ...	35
	Canteens	6
	Fuel storage depots ...	—
	Total	641
	Total males ...	293
	Total females ...	348

Table D—No exemptions were current at 31st December, 1966.
No exemptions were granted, extended, refused
or withdrawn during the year.

Table E—No prosecutions were instituted during the year.

AIR POLLUTION

Control of Industrial Smoke

Air pollution from industrial premises comes chiefly from the coke ovens and chemical works, colliery premises including railway shunting engines, glassworks, brickworks and scrap metal works.

Efforts have been made in co-operation with the District Inspector under the Alkali, etc. Works Regulation Act, to keep the pollution arising from the coke oven and chemical works to the minimum practicable.

Warnings have been issued concerning the emission of dark smoke from scrap metal works arising from the burning of scrap cable, old vehicles and similar materials. Following reports to the Council, the Council decided to institute legal proceedings if necessary under the powers contained in the provisions of section 27 of the West Riding County Council (General Powers) Act, 1964. Such proceedings were not, however, found necessary during the year.

Having regard to the increasing metal scrap recovery business in the District every effort should be made to ensure that it does not become a major source of air pollution.

Control of Domestic Smoke

Occasional inspections of domestic premises in Smoke Control Areas 1 and 2 were made during the year with a view to ensuring compliance with the Smoke Control Orders. Some emissions of smoke from domestic chimneys were noted and warnings given to the occupiers concerned.

Preparatory work was done with a view to the introduction of Smoke Control Area Number 3, including a postal survey of the privately owned houses in the proposed area and inspections of the various types of Council houses involved. In September the Council made The Wath-upon-Dearne, Number 3, Smoke Control Order, 1966, relating to an area containing 267 privately owned dwellings and 526 Council owned dwellings.

Air Pollution Measurement

Measurement of atmospheric pollution with the use of five lead dioxide gauges and one deposit gauge was continued during the year.

The following tables set out the information which was given in the monthly reports supplied by the Public Analyst.

Lead Dioxide Gauges

1966 Month	Mg. of SO3/day collected by 100 sq. cms. of batch A PbO2 at:—					Pre- vailing winds
	Wath Wood Reservoir	Park Lane	Sewage Works	Strath- more	Farfield Lane	
January	4·10	3·84	3·34	2·24	3·65	SE
February	2·56	3·31	2·77	1·71	2·68	SW
March	2·18	2·59	1·69	1·58	2·51	W
April	1·65	3·34	2·27	1·61	2·57	NE
May	1·71	1·64	1·60	1·06	1·78	SE
June	1·38	1·65	1·14	0·96	1·31	SW
July	1·38	1·32	1·26	0·85	1·25	WN
August	1·64	2·11	1·46	1·10	1·67	NE
September	2·10	1·68	1·45	0·99	1·56	W
October ...	2·18	1·97	1·70	1·39	1·55	SE
November	2·74	1·97	2·47	2·94	2·51	WN - NWN
December	3·43	2·83	2·51	2·12	3·00	WNW
Totals	27·03	28·35	23·66	18·56	25·94	—
Monthly Average	2·25	2·36	1·93	1·55	2·16	—

Deposit Gauge

1966 Month	Period of exposure in days	Monthly rain deposit in inches	Total un- dissolved matter in tons/sq. mile	Total dissolved matter in tons/sq. mile	Total solids in tons per sq. mile	Prevail- ing winds
January	31	1 ·18	5 ·95	3 ·84	9 ·79	SE
February	28	4 ·45	7 ·31	9 ·58	16 ·89	SW
March	32	1 ·02	26 ·31	7 ·14	33 ·45	W
April	31	4 ·10	9 ·48	12 ·51	21 ·99	NE
May	30	1 ·58	31 ·81	5 ·54	37 ·36	SE
June	33	2 ·36	27 ·80	6 ·56	34 ·36	SW
July	28	2 ·36	9 ·45	4 ·01	13 ·46	WN
August	32	4 ·14	7 ·58	9 ·25	16 ·83	NE
September	30	2 ·13	7 ·17	20 ·94	28 ·11	W
October	29	1 ·85	4 ·11	4 ·42	8 ·53	SE
November	30	2 ·36	5 ·06	7 ·95	13 ·02	WN - NWN
December	32	1 ·30	2 ·51	5 ·13	7 ·65	WNW
Totals ..	366	28 ·83	144 ·54	93 ·87	241 ·44	—
Monthly Average	30 ·5	2 ·40	12 ·05	7 ·82	2 ·12	—

Lead Dioxide Gauges

Average Pollution 1959-1966

The average yearly figures for sulphur dioxide pollution for the past eight years are given below:

Mgs. of SO₃ per day collected by 100 sq. cm. of Batch A Pb02

Year	Sites of Lead Dioxide Gauges				
	Wath Wood	Park Lane	Sewage Works	Strathmore	Farfield Lane
1959	3.20	3.03	2.61	1.91	2.78
1960	3.03	2.85	2.64	1.65	2.97
1961	3.02	2.83	2.69	1.61	2.66
1962	2.92	2.84	2.35	1.51	2.79
1963	2.89	3.54	2.51	1.59	2.32
1964	2.64	3.15	2.47	1.35	2.32
1965	2.44	2.92	2.24	1.36	2.46
1966	2.25	2.35	1.97	1.55	2.17

The figures for 1966 indicate a further general reduction in air pollution in the District.

Registration of Scrap Metal Dealers

Six persons are registered as scrap metal dealers. Four places in the District are in use as scrap metal stores.

Water Supply

The public water supply for the Urban District is provided by Sheffield Corporation Waterworks. The water supplied was satisfactory in quality and adequate in quantity throughout the year. All the houses in the District have a piped supply of water from the public mains. In a number of instances the supply to the houses was insufficient because of deposits in the supply pipes or of inadequacy of the service pipe supplying a number of properties.

The following information has kindly been supplied by the General Manager and Engineer of the Waterworks:

1 Nature and Origin of Water Supply

Yorkshire Derwent. River derived, lime-soda softened, filtered and chlorinated.

2 Natural Flouride Content

0.1—0.2 p.p.m. F.

3 Number of Samples of Water Examined

Chemical		Plumbo-Solvency		Bacteriological	
Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory (lead greater than 0.1 p.p.m.)	Satis- factory	Unsatis- factory
60	Nil	22	Nil	60	Nil

4 Bacteriological examination of raw and final treated water

Raw Water			Final Treated Water		
Number of samples examined	Number containing Coliform organisms	Number containing E. Coli I	Number of samples examined	Number containing Coliform organisms	Number containing E. Coli I
51	51	50	254	1	NIL

Public Swimming Baths

Samples of water from the public swimming bath were taken on 13 occasions during the year and submitted to the Public Health Laboratory for examination, and the reports received are summarised as follows:

(a) Samples taken for Bacteriological Examination

Number of samples examined	Number containing Coliform Organisms	Number containing Bact. Coli (Type 1) in 100 ml.
25	11	6

(b) Samples Submitted for Test for Free Chlorine and pH Value

Number of samples examined	Free Chlorine Content		pH Value	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
24	15	9	1	23

Samples are considered to be satisfactory if the free chlorine content is between 0.2 and 0.5 parts per million and pH Value between 7.2 and 8.0.

The results obtained from the examination of samples of swimming bath water and the conditions found at the swimming baths indicated the need for improvement of the buildings and equipment and the operation and use of the equipment.

The matter was under consideration by the Council during the year.

SECTION "D"

HOUSING

Work continued during the year in connection with the clearance of unfit houses listed on the Council's slum clearance programme, clearance area procedure being adopted in connection with 21 houses and the Housing Act procedure relating to individual unfit houses in respect of 35 houses.

The Council took further steps during the year to promote the improvement of dwellings and secure the provision of bathroom, piped hot water systems, internal waterclosets, etc. where those facilities did not exist. 135 dwellings in the Sandymount Road area were included in the Wath-upon-Dearne No. 1 Improvement Area. A considerable amount of detailed work is necessary in connection with the formal application of the provisions of the Act relating to the compulsory improvement of dwellings, and unfortunately the staff were unable to give the necessary time to make much progress during the year.

The repair of houses damaged by mining subsidence continued but appeared to be mainly concerned with making good damage which occurred in previous years. In some instances severe subsidence damage to older sub-standard houses resulted in the application of demolition procedure earlier than would otherwise have appertained.

The provisions of the Public Health Acts were applied in order to secure urgent repairs to privately owned houses following receipt of complaints but there is a need to undertake the systematic inspection of blocks of property under the provisions of the Housing Acts in order to ensure that dwellings are maintained in good repair.

Housing statistics are as follows:

1	No. of dwellinghouses in District	...	...	...	5261
2	No. of houses included in above				
	(a) Back-to-back	...			2
	(b) Single back	...			Nil
3	Slum clearance				
	Estimated number of unfit houses at 31-12-66 in respect of which no representation has yet been made	...	...	...	402
	Details of future slum clearance programmes—				
	Clearance of 275 houses over period of next 5 years				
4	Houses in Clearance Areas and Unfit Houses elsewhere				
	No. of houses included in Representations made during the year				
	(a) In Clearance Areas	...	...	...	21
	(b) Individual unfit houses	...	...	...	35

A. HOUSES DEMOLISHED during the year	IN OR ADJOINING CLEARANCE AREAS declared under Section 42 of the Hsg. Act 1957	Unfit for human habitation	Number of houses Number of separate dwellings contained therein	Nil
				Nil
		Included by reason of bad arrangement	Number of houses Number of separate dwellings contained therein	Nil
				Nil
		On land acquired under Section 43 (2) Housing Act 1957	Number of houses Number of separate dwellings contained therein	Nil
				Nil
	NOT IN OR ADJOINING CLEARANCE AREAS	As a result of formal or informal procedure under Section 16 or Section 17 (1) Housing Act 1957	Number of houses Number of separate dwellings contained therein	35
				35
		Local authority owned houses certified unfit by the Medical Officer of Health	Number of houses Number of separate dwellings contained therein	20
				20
		Houses unfit for human habitation where action has been taken under local Acts	Number of houses Number of separate dwellings contained therein	Nil
				Nil
		Houses included in unfit-ness orders made under para 2 of the Second Schedule to the Land Compensation Act 1961	Number of houses Number of separate dwellings contained therein	Nil
				Nil
	Number of separate dwellings included above which were previously reported as closed		Reported as closed up to 31st December 1965	1
			Reported as closed since 31st December 1965	1
B. UNFIT HOUSES CLOSED during the year in pursuance of closing orders or undertakings	Under Sections 16 (4), 17 (1) and 35 (1) Housing Act 1957 and Section 26 Hsg. Act 1961		Number of houses Number of separate dwellings contained therein	Nil
				Nil
	Under Sections 17 (3) and 26 Housing Act 1957		Number of houses Number of separate dwellings contained therein	Nil
				Nil
C. Number of Persons Displaced during year	PARTS OF BUILDINGS CLOSED under Section 18 Housing Act 1957		Number of dwellings	Nil
	From houses to be demolished in or adjoining clearance areas			Nil
	From houses to be demolished not in or adjoining clearance areas			59
	From houses to be closed			Nil
	From parts of buildings to be closed			Nil

D. No. of Families Dis-placed during year	From houses to be demolished in or adjoining clearance areas				Nil
	From houses to be demolished not in or adjoining clearance areas				24
	From houses to be closed				Nil
	From parts of buildings to be closed				Nil
E. UNFIT HOUSES MADE FIT	After informal action by local authority		by owner		Nil
	After formal notice under Sections 9 and 16 Housing Act 1957		(a)	by owner	Nil
			(b)	by local authority	Nil
	After formal notice under Public Health Acts				Nil
	After modification or revocation of a clearance order under Section 24 Housing Act 1961				Nil
	After determination of a demolition order under Section 24 Housing Act 1957				Nil
	After determination of a closing order under Section 27 Housing Act 1957				Nil
F. HOUSES IN WHICH DEFECTS WERE REMEDIED (other than unfit houses made fit). After formal notice under Public Health Acts					6
G. UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957)	POSITION AT END OF YEAR	Retained for temporary accommodation	Under Section 48	Number of houses	Nil
			Under Section 17 (2)	Number of separate dwellings contained therein	Nil
				Number of houses	Nil
		Licensed for temporary accommodation under Section 34 or 53	Under Section 46	Number of separate dwellings contained therein	Nil
				Number of houses	Nil
				Number of separate dwellings contained therein	Nil
H. Purchase of Houses by Agreement	Houses in clearance areas other than those included in confirmed or compulsory purchase orders			Number of houses	Nil
				Number of occupants	Nil

5

No. of families rehoused during the year into Council owned dwellings				
(a)	Clearance Areas, etc.	...	...	24
(b)	Overcrowding	...	...	Nil

6 Overcrowding

There is little, if any, serious overcrowding of dwellings in the area. It is often found however, that in the case of larger families the sleeping accommodation is not really adequate because bedrooms are of inadequate size.

7 New Dwellings

No. of new dwellings completed during the year—				
By the Local Authority	...	...	...	27
By Private Enterprise	...	...	...	8

8 Grants for conversion or improvement of housing accommodation

	Formal applications received during the year	Application approved during the year	Number of dwellings completed during the year
	Number of dwellings	Number of dwellings	
(a) Conversions (The number of dwellings is the number resulting from completion of the work)	Nil	Nil	Nil
(b) Improvements	32	28	30

9 Details of Advances for the purpose of acquiring or constructing houses.

Loans are granted by the Council in approved cases for the purpose of acquiring, constructing or improving houses.

SECTION "E"

SERVICES UNDER THE FOOD AND DRUGS ACT, 1955

Slaughterhouses and Inspection of Meat

One licensed slaughterhouse was in use during the year and the carcases and offals of all the animals slaughtered there were inspected by the Meat Inspector in accordance with the provisions of the Meat Inspection Regulations. The Public Health Inspectors of Dearne Urban District Council carried out meat inspection duties at this slaughterhouse on occasion when necessary to ensure inspection of all animals slaughtered.

This assistance was necessary as the Council's qualified additional Public Health Inspector left the Council's service during the previous year and was not replaced until July. I am grateful for the help given by the Dearne U.D.C. Public Health Inspectors.

Particulars of animals slaughtered and inspected and fresh killed meat condemned during the year ended 31st December, 1966 :—

	Cattle ex- clud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	1824	434	5	9955	—	—
Number inspected	1824	434	5	9955	—	—
All diseases except Tuberculosis and Cysticerci Whole carcasses condemned	1	3	—	21	—	—
Carcases of which some part or organ was condemned	939	263	1	1082	—	—
Percentage of the number inspected, affected with dis- ease other than Tuberculosis and Cysticerci	50·7%	61·8 %	20%	11·1 %	—	—
Tuberculosis only:—						
Whole carcase condemned	—	—	—	—	—	—
Carcases of which some part or organ was condemned	2	—	—	—	—	—
Percentage of Number inspected, affected with tuber- culosis	0·11%	—	—	—	—	—
Cysticercosis:—						
Carcase of which some part or organ was condemned	13	1	—	16	—	—
Carcase submitted to treatment by refrigeration	13	1	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

All the meat condemned as unfit for human consumption was stained with a green dye, and was then collected by an animal by-products manufacturer for removal to his premises for processing.

Slaughter of Animals—Prevention of Cruelty

Licences are issued annually to persons engaged or qualified to slaughter animals in slaughterhouses. 16 licences were issued during 1966. The licences require humane methods of slaughter to be practised using a captive bolt pistol. Inspections were made at the slaughterhouse from time to time to check compliance with the requirements of the prevention of cruelty regulations relating to the cleansing of lairs and the provision of equipment, food and water supply for animals on the premises.

Inspection of Other Foods

Four complaints were made at the office by members of the public concerning the sale of food considered to be unfit. One complaint related to a jar of meat extract thought to contain glass fragments which ultimately were identified as salt crystals; one to a tin of second grade salmon which although of poor quality was not unfit; one to a foreign body (thought by the purchaser to be a human tooth but was in fact a small quartz pebble) in a can of beans; and one to self-raising flour said to have a bitter taste. Investigations were made into the two complaints where the food concerned was purchased in this Urban District. In the other two cases the food had been purchased in adjoining Urban Districts and the complaints were passed to the Public Health Inspector for the District concerned.

The undermentioned foodstuffs were condemned on inspection at foodshops. The food was surrendered voluntarily by the owners and was then collected by the refuse collection department and buried at the Council's refuse tip.

Articles	Number of cans, jars, bottles or packets	Weight (lbs.)
Frozen vegetables	2	—
Canned fruit ...	4	16½
Canned meat ...	29	237
Frozen fish ...	3	—
Mutton	—	31
Frozen chickens ...	6	—
Frozen sausages ...	2	—
Frozen cake ...	2	—
Totals ...	48	284½

Food Premises

The number of various types of food premises in the District are as follows:—

Grocers and General Dealers	...	...	60
Greengrocers	...	...	5
Fish friers	...	...	13
Fishmongers	...	...	2
Butchers	...	...	14
Restaurants and cafes	...	...	3
Works canteens	...	...	4
School canteens	...	...	5
Clubs and Public Houses	...	...	23
Total			129

Food premises registered under section 16 of the Food and Drugs Act, 1955, are:—

(a) For the sale of ice cream	...	...	46
(b) For the preparation or manufacture of sausages, or potted, pressed, pickled or preserved food	...	...	13
Dairies registered under the Milk and Dairies Regulations	...	...	3

112 visits were made to food premises during the year, for the purpose of ensuring compliance with the Food Hygiene Regulations and of preventing the sale of unfit foodstuffs.

Hawkers of Food

23 persons are registered with the Council as hawkers of food within the Urban District and inspection of some of the vehicles used for the sale of food was carried out during the year.

PUBLIC CLEANSING

Refuse Collection and Disposal

The following statement with respect to the work done in connection with refuse collection and disposal refers to the year ended 31st December, 1966.

Particulars of receptacles emptied and loads of refuse removed.

Type of receptacles emptied	Number Emptied	Number of Loads of refuse
Dustbins	295,509	2,191½
Dry ashpits	11	10
Trade refuse bins	6,023	158
Waste paper and cardboard	—	92½
Total number of loads collected ...	—	2,452

Particulars relating to the disposal of refuse:—

	No. of Loads
House and trade refuse delivered at tip ...	2808
Refuse delivered at tip by private owners	780
Refuse delivered at tip by Engineer and Surveyor's Department	416
Refuse delivered at tip by W.R.C.C. (Highways)	14
Salvage from shops delivered at Skin Yard Depot	92
Total number of loads disposed of ...	4110
Estimated weight of materials disposed of at tip	6901 tons

Particulars of materials which were salvaged from refuse and sold:—

Materials Sold	Weight			
	tons	cwts.	qrs.	lbs.
Waste paper	13	19	1	0
Textiles	—	—	—	—
Non ferrous metals...				4
Totals.....	13	19	1	4

A regular weekly collection of house refuse was maintained throughout the year. The employees engaged on refuse collection successfully operated a stint and bonus system so as to ensure that, in spite of problems arising from holidays and absence of men due to sickness and other causes, the dustbins have been regularly emptied every week.

33 requests were made at the office for the collection and disposal of large items of household furniture and furnishings such as bedsteads, mattresses, settees, etc.,. These requests were complied with and the materials buried in the Council's refuse tips. This service is provided free of charge in order to discourage the dumping of such materials on waste land or burning them in backyards and gardens with the resulting nuisance to the occupants of adjoining premises.

The removal of large accumulations of garden rubbish, and of rubble, bricks, stone and timber arising from demolished sheds, outbuildings and occupier's "do it yourself" jobs around the house presented some problems. These materials were not classed as house refuse and were only removed on payment of the cost. Occupiers of dwellinghouse premises appear to have great difficulty in obtaining the services of private hauliers to cart away such materials, and the Council's refuse collection service is not really equipped to carry out such duties in addition to its normal house refuse collection work.

The collection of trade refuse from shops, with special collections of waste paper and cardboard on two afternoons each week continued, as did the twice weekly collection of putrescible refuse from certain shop premises under a trade refuse collection scheme.

Except for small quantities of waste paper and cardboard, metals and textiles which are recovered as salvage and sold, all the refuse was disposed of by tipping at the Council's refuse tips. Tipping was carried out in a drained portion of the canal at Biscay Bank on Wet Moor Lane tip, and on the Oakland Terrace site. Preparations were made to extend the Wet Moor Lane tip by tipping in the remaining portion of the "Culverts Field". Steps were also taken by the Council during the year with a view to purchasing further land in the Wet Moor Lane area for use for tipping purposes. Provision is made at the tips for the disposal of other refuse in addition to house refuse so that limited quantities of builders refuse, excavated soil and subsoil can be used at the tips for covering

material. Inert material, mainly ash, from the tips laid down many years ago is also being used as covering material for present day tips. A tractor loading shovel was in use for levelling and consolidating the tipped material and for applying covering material. Precautions were taken continuously to control rodents, insect pests and tip fires and no serious problems were encountered.

SECTION "F"

PREVENTION AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

Infectious Diseases (Corrected) Age Distribution

Diseases	Total Cases Notified	Cases After Correction	Under 1 yr.	1 —	2 —	3 —	4 —	5 — 9	10 — 14	15 — 24	25 and Over	45 — 64	65 and Over
Scarlet Fever	6	6	—	1	—	1	—	1	3	—	—	—	—
Measles	59	59	4	13	5	2	13	19	3	—	—	—	—
Acute pneumonia	1	1	—	—	—	—	—	—	—	—	1	—	—
Whooping Cough	1	1	—	—	—	—	—	1	—	—	—	—	—
TOTALS	67	67	4	14	5	3	13	21	6	—	1	—	—

TUBERCULOSIS

No. on Register at 31st December, 1966

			Males	Females	Total
Pulmonary	...	...	40	18	58
Non-Pulmonary	...	...	6	5	11
			46	23	69

No. Removed from Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M	F	M	F	
Deaths	...	...	1	—	—	—	1
Others (cured, re-diagnosed, transfers of area, etc.)			—	3	—	—	3
			1	3	—	—	4

Addition to Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M	F	M	F	
New Notifications	...		3	—	—	—	3
Others (cases restored to Register, transfers, etc.)			—	—	—	—	—
			3	—	—	—	3

New Notifications

Age Groups:			Pulmonary		Non-Pulmonary		Total
			M	F	M	F	
15—24	1	—	—	—	1
35—44	1	—	—	—	1
45—54	1	—	—	—	1
			3	—	—	—	3

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